



# CITY OF BELLBROOK

## BACKFLOW PREVENTER INSPECTION

UTILITY BILLING  
15 EAST FRANKLIN STREET, BELLBROOK, OHIO 45305  
(937) 848-4638 [WWW.CITYOFBELLBROOK.ORG](http://WWW.CITYOFBELLBROOK.ORG)

### SERVICE ADDRESS & CONTACT INFORMATION

THIS FORM MUST BE COMPLETED AND RETURNED BY A CERTIFIED TESTER TO THE CITY OF BELLBROOK UTILITY BILLING OFFICE.

REASON FOR INSPECTION:  NEW DEVICE  ANNUAL TEST

RESIDENT/BUSINESS NAME \_\_\_\_\_ PHONE \_\_\_\_\_

SERVICE ADDRESS \_\_\_\_\_

RESPONSIBLE PARTY (IF DIFFERENT FROM ABOVE) \_\_\_\_\_ PHONE \_\_\_\_\_

ADDRESS \_\_\_\_\_

### BACKFLOW PREVENTER INFORMATION

BACKFLOW PREVENTER USE:  FIRE LINE  IRRIGATION  MAIN LINE  ISOLATION

SIZE \_\_\_\_\_ MAKE \_\_\_\_\_ MODEL \_\_\_\_\_ SERIAL # \_\_\_\_\_

LOCATION OF DEVICE \_\_\_\_\_

### TEST INFORMATION

DATE OF TEST \_\_\_\_/\_\_\_\_/\_\_\_\_

FINAL TEST RESULTS:  PASS  FAIL

#### 1. REDUCE PRESSURE BACKFLOW PREVENTER (ASSE 1013)

	CHECK VALVE #1	CHECK VALVE #2	DIFFERENTIAL PRESSURE RELIEF VALVE
<b>TEST BEFORE REPAIR</b>	<input type="checkbox"/> LEAKED <input type="checkbox"/> CLOSED TIGHT	<input type="checkbox"/> LEAKED <input type="checkbox"/> CLOSED TIGHT	OPENED AT _____ PSI REDUCED PRESSURE
<b>DESCRIBE REPAIRS</b>			OPENED AT _____ PSI REDUCED PRESSURE
<b>FINAL TEST</b>	<input type="checkbox"/> CLOSED TIGHT	<input type="checkbox"/> CLOSED TIGHT	

#### 2. DOUBLE CHECK VALVE ASSEMBLY (ASSE 1015) – USE CHECK VALVE #1 AND CHECK VALVE #2 TESTS ONLY

#### 3. PRESSURE TYPE VACUUM BREAKERS (ASSE 1020) – AIR INLET OPENED AT \_\_\_\_\_ PSI CHECK \_\_\_\_\_ PSI

TEST PERFORMED BY \_\_\_\_\_ CERTIFIED TESTER # \_\_\_\_\_

CERTIFICATION EXPIRATION DATE \_\_\_\_/\_\_\_\_/\_\_\_\_

PLUMBING COMPANY \_\_\_\_\_ PHONE \_\_\_\_\_